

**Fill in this information to identify the case and this filing:**

Debtor Name NINETY-FIVE MADISON COMPANY, LP  
United States Bankruptcy Court for the: Southern District of NY  
Case number (If known): 21-10529-shl (State)

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 11/08/2021  
MM / DD / YYYY

 /s/ Michael Sklar

Signature of individual signing on behalf of debtor

Michael Sklar

Printed name

General Partner

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor NINETY-FIVE MADISON COMPANY, LP

United States Bankruptcy Court for the: Southern District of NY  
(State)

Case number 21-10529-shl  
(If known)

☒ Check if this is an amended filing

**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1** Priority creditor's name and mailing address

NYC Department of Finance

P.O. Box 680

Newark, N.J. 07101-0680

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is: \$

Total claim

1,292,470.00

Priority amount

\$ 1,292,470.00

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Real Estate Taxes

Is the claim subject to offset?

- ☐ No
- ☐ Yes

**2.2** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )

Basis for the claim:

Is the claim subject to offset?

- ☐ No
- ☐ Yes

**2.3** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )

Basis for the claim:

Is the claim subject to offset?

- ☐ No
- ☐ Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

**3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> Vitra, Inc. 7528 Walker Way Allentown, PA 18106  Date or dates debt was incurred <u>2017, 2018</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Arbitration Award</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$ <u>1,855,880.00</u>
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> Verrill Dana LLP 355 Riverside Avenue Westport, Connecticut 06880  Date or dates debt was incurred <u>2017-2021</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Legal Services</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>875,000.00</u>
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> Danielle C. Lesser, Esq. 909 Third Avenue New York, NY 10022  Date or dates debt was incurred <u>2017-2020</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Receiver's Award</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>204,140.00</u>
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> Rosenberg Feldman Smith LLP 520 White Plains Rd., Ste. 500 Tarrytown, NY 10591  Date or dates debt was incurred <u>2017-2018</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Legal Services</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$ <u>189,328.86</u>
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> Harty Built, LLC 300 Park Ave., 13th Floor New York, New York 10022  Date or dates debt was incurred <u>2018</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Construction Services</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>26,644.50</u>
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> Agir Electrical, Ltd. 61 Plainfield Road Albertson, NY 11507  Date or dates debt was incurred <u>2017</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Electrical Services</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>11,494.49</u>

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<b>3.7</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Ms. Rita Sklar</u>  <u>3 East 83rd Street</u> <u>New York, New York 10028</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Fees incurred on behalf of the Debtor, services rendered to the Debtor and funds advanced to the Debtor. <b>Basis for the claim:</b> <u>to the Debtor and funds advanced to the Debtor.</u>	<b>\$</b> <u>355,034.83</u>
	<b>Date or dates debt was incurred</b> <u>2019-2020</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>Is the claim subject to offset?</b> While the claim is undisputed, the claim may include unliquidated amounts and is subject to offsets and <input type="checkbox"/> No <input type="checkbox"/> Yes	
<b>3.8</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Estate of Lois Weinstein</u>  <u>c/o J. Barr, 225 Broadway, Ste. 3110</u> <u>New York, New York 10007</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Partnership Share</u>	<b>\$</b> <u>4,500,000.00</u>
	<b>Date or dates debt was incurred</b> <u>10/23/20</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
<b>3.9</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Everest Scaffolding, Inc.</u>  <u>1150 Longwood Avenue</u> <u>Bronx, New York 10474</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u>	<b>\$</b> <u>14,861.42</u>
	<b>Date or dates debt was incurred</b> <u>                    </u> <b>Last 4 digits of account number</b> <u>      </u>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>3.10</b>	<b>Nonpriority creditor's name and mailing address</b> <u>First Insurance Funding Corporation</u>  <u>450 Skokie Blvd., Ste. 1000</u> <u>Northbrook, Illinois 60062-7917</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Insurance Funding</u>	<b>\$</b> <u>24,315.68</u>
	<b>Date or dates debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>3.11</b>	<b>Nonpriority creditor's name and mailing address</b> <u>TEI Group</u>  <u>30-30 47th Ave., St. 610</u> <u>Long Island City, N.Y. 11101</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Repairs</u>	<b>\$</b> <u>20,336.25</u>
	<b>Date or dates debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

<b>Part 2: Additional Page</b>	
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.	
Amount of claim	
3.12 Nonpriority creditor's name and mailing address	
Sklar Equities, Inc.	
95 Madison Ave., Ste 1201	
New York, New York 10016	
As of the petition filing date, the claim is:	
Check all that apply.	
<input type="checkbox"/> Contingent	
<input checked="" type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed	
<input type="checkbox"/> Liquidated and neither contingent nor disputed	
Basis for the claim: Fees incurred on behalf of the Debtor, services rendered to the Debtor and funds advanced to the Debtor.	
Date or dates debt was incurred 2019-2020	
Last 4 digits of account number	
Is the claim subject to offset?	
<input type="checkbox"/> No	
<input checked="" type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address	
As of the petition filing date, the claim is:	
Check all that apply.	
<input type="checkbox"/> Contingent	
<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed	
Basis for the claim:	
Is the claim subject to offset?	
<input type="checkbox"/> No	
<input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address	
As of the petition filing date, the claim is:	
Check all that apply.	
<input type="checkbox"/> Contingent	
<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed	
Basis for the claim:	
Is the claim subject to offset?	
<input type="checkbox"/> No	
<input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address	
As of the petition filing date, the claim is:	
Check all that apply.	
<input type="checkbox"/> Contingent	
<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed	
Basis for the claim:	
Is the claim subject to offset?	
<input type="checkbox"/> No	
<input type="checkbox"/> Yes	
3.11 Nonpriority creditor's name and mailing address	
As of the petition filing date, the claim is:	
Check all that apply.	
<input type="checkbox"/> Contingent	
<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed	
Basis for the claim:	
Is the claim subject to offset?	
<input type="checkbox"/> No	
<input type="checkbox"/> Yes	

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts**5a. **Total claims from Part 1**

5a.

\$ 1,292,470.00

5b. **Total claims from Part 2**

5b.

+

\$ 8,432,070.86

5c. **Total of Parts 1 and 2**

5c.

\$ 9,724,540.86

Lines 5a + 5b = 5c.